UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspto.gov

# NOTICE OF ALLOWANCE AND FEE(S) DUE

7590

08/23/2006

Jane Massey Licata Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053

EXA	MINER
PRYOR, ALT	ON NATHANIEL
ART UNIT	PAPER NUMBER
1616	

DATE MAILED: 08/23/2006

1	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
•	10/687,102	10/15/2003	Edward H. Abraham	DC-0242	7243

TITLE OF INVENTION: METHOD OF TREATING BONE METASTASIS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	11/24/2006

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE DOES NOT REFLECT A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE IN THIS APPLICATION. IF AN ISSUE FEE HAS PREVIOUSLY BEEN PAID IN THIS APPLICATION (AS SHOWN ABOVE), THE RETURN OF PART B OF THIS FORM WILL BE CONSIDERED A REQUEST TO REAPPLY THE PREVIOUSLY PAID ISSUE FEE TOWARD THE ISSUE FEE NOW DUE.

#### HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

- A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.
- B. If the status above is to be removed, check box 5b on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

- A. Pay TOTAL FEE(S) DUE shown above, or
- B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.
- II. PART B FEE(S) TRANSMITTAL, or its equivalent, must be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). If you are charging the fee(s) to your deposit account, section "4b" of Part B Fee(s) Transmittal should be completed and an extra copy of the form should be submitted. If an equivalent of Part B is filed, a request to reapply a previously paid issue fee must be clearly made, and delays in processing may occur due to the difficulty in recognizing the paper as an equivalent of Part B.
- III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

### PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of Mailing or Transmission.  Certificate of Mailing or Transmission  Licata & Tyrrell P.C.  66 E. Main Street  Marlton, NJ 08053  Certificate of Mailing or Transmission  Left the first postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO.  10/687,102 10/15/2003 Edward H. Abraham DC-0242 7243  TITLE OF INVENTION: METHOD OF TREATING BONE METASTASIS  APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(s) DUE DATE DUE nonprovisional YES \$700 \$300 \$0 \$1000 11/24/2006  EXAMINER ART UNIT CLASS-SUBCLASS  PRYOR, ALTON NATHANIEL 1616 514-079000  1. Change of correspondence address or indication of "Fee Address" (37) 2. For printing on the patent front page, list	appropriate. All further indicated unless correcte maintenance fee notificate	ed below or directed oth	ng the Patent, advance of nerwise in Block I, by (a	rders and notification of many specifying a new corres	naintenance fees w pondence address;	rill be mailed to the current and/or (b) indicating a sep	t correspondence address as arate "FEE ADDRESS" for
Dane Massey Licata   Licata & Tyrrell P.C.   GENTINETS of Malling or Transmission   Licata & Tyrrell P.C.   GENTINETS of Malling or Transmission   Licata & Tyrrell P.C.   GENTINETS of Markey certify that this Fest() Transmission   Licita de States Potata Service with sufficient potage for first being decident with the United States Potata Service with sufficient potage for first being decident with the United States Potata Service with sufficient potage for first being decident with the United States Potata Service with sufficient potage for first being decident with the United States Potata Service with sufficient potage for first potage for			ock 1 for any change of address)	Fee(	s) Transmittal. Thi	s certificate cannot be used I paper, such as an assignme	for any other accompanying
Jane Massey Licata Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053    Comparison of the Comp		7590 08/23	/2006			_	smission
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO.  10/687,102 10/15/2003 Edward H. Abraham DC-0242 7243  APPLICATION NO. METHOD OF TREATING BONE METASTASIS  APPLIN TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES 5700 \$300 \$0 \$1000 11/24/2006  EXAMINER ART UNIT CLASS-SUBCLASS  PRYOR, ALTON NATHANIEL 1616 514-079000  EXAMINER ART UNIT CLASS-SUBCLASS  PRYOR, ALTON NATHANIEL 1616 514-079000  Change of correspondence address or indication of "Fee Address" (37 16) the names of up to 3 registered patent attorneys or agents of the names of up to 3 registered patent attorneys or agent of the names of up to 3 registered patent attorneys or agent attorneys or agent. If no name is 3 1806, no name will be printed.  (A) NAME OF ASSIGNEE ASSIGNEE (CITY and STATE OR COUNTRY)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignce is identified below, the document has been filed for regordation as set forth in 37 CFR 3.11. Completion of this form is NOT a bublitute for filing an assignment.  (A) NAME OF ASSIGNEE  PRYOR and TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee category or categories (will not be printed on the patent):   Individual   Corporation or other private group entity   Government    (B) RESIDENCE: (CITY and STATE OR COUNTRY)  PRESSIDENCE: (CITY and STATE OR COUNTRY)  10. Change in Earthy Status (from status indicated above)   A check is enclosed.   Payment by credit card, From PTO-2038 is attached.   A check is enclosed.   Payment by credit card, From PTO-2038 is attached.   Payment by credit card, From PTO-20				I her	eby certify that th	s Fee(s) Transmittal is bein	g deposited with the United
Mariton, NJ 08053    Company   Compa	•			State addr	es Postal Service we essed to the Mail	Stop ISSUE FEE address	above, or being facsimile
APPLICATION NO.   FILING DATE   FIRST NAMED INVENTOR   ATTORNEY DOCKET NO.   CONFIRMATION NO.   10/687,102   10/15/2003   Edward H. Abraham   DC-0242   7243   TITLE OF INVENTION: METHOD OF TREATING BONE METASTASIS    APPLIN, TYPE   SMALL ENTITY   ISSUE FEE DUE   PUBLICATION FEE DUE   PREV. PAID ISSUE FEE   TOTAL FEE(S) DUE   DATE DUE				trans	mitted to the USP	TO (571) 273-2885, on the	date indicated below.
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO.  10/687,102 10/15/2003 Edward H. Abraham DC-0242 7243  TITLE OF INVENTION: METHOD OF TREATING BONE METASTASIS  APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$300 \$0 \$1000 11/24/2006  EXAMINER ART UNIT CLASS-SUBCLASS  PRYOR, ALTON NATHANIEL 1616 514-079000  Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  The provisional YES (or Change of Correspondence Address from PTO/Spil 22) attached.  The provisional YES (or Change of Correspondence Address from PTO/Spil 22) attached.  The provisional YES (or Change of Correspondence Address from PTO/Spil 22) attached.  The provisional YES (or Change of Correspondence Address from PTO/Spil 22) attached.  The provisional YES (or Change of Correspondence Address from PTO/Spil 22) attached.  The name of a single firm (having as a member a registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agents. If no name is 1 registered patent attorneys or agent is dentified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME	Mariton, NJ 080	33					(Depositor's name)
APPLICATION NO.   FILING DATE   FIRST NAMED INVENTOR   ATTORNEY DOCKET NO.   CONFIRMATION NO.    10/687,102   10/15/2003   Edward H. Abraham   DC-0242   7243    TITLE OF INVENTION: METHOD OF TREATING BONE METASTASIS  APPLN.TYPE   SMALL ENTITY   ISSUE FEE DUE   PUBLICATION FEE DUE   PREV. PAID ISSUE FEE   TOTAL FEE(S) DUE   DATE DUE    nonprovisional   YES   \$700   \$300   \$0   \$1000   11/24/2006    EXAMINER   ART UNIT   CLASS-SUBCLASS    PRYOR, ALTON NATHANIEL   1616   1616    Change of correspondence address or indication of "Fee Address" (37   Cl. Anage of Correspondence Address form PTO/SBH22) attached.   Cl. Anage of Correspondence Address from PTO/SBH220 attached. Use of a Customer   PTO/SBH47, Rev 03-02 or more recent) attached. Use of a Customer   2 registered patent attorneys or agents. If no name is last, on a man will be printed.    1. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)    2. PLEASE NOTE: Unless an sasingere is identified below, no assignee datu will appear on the patent. If an assignee is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.    (A) NAME OF ASSIGNEE   (B) RESIDENCE (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):   Individual   Corporation or other private group entity   Government    1a. The following fee(s) are submitted:   Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)    1a. The following fee and Publication Fee (If required), will not be accepted from anyone other than the applicant; a registered attorney or agent, or the assignee or other party in necess as shown by the records of the United States Patent and Trademark Office.  Authorized Signature   Date   Payment of Pee(s): (Please first reapply any previously paid issue fee shown above)    10. A. Applicant claims SMALL ENTITY status. See 37 CFR 1.27(g,2).  Authorized						· · · · · · · · · · · · · · · · · · ·	(Signature)
Edward H. Abraham   DC-0242   7243							(Date)
APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$300 \$0 \$1000 \$1124/2006  EXAMINER ART UNIT CLASS-SUBCLASS  PRYOR, ALTON NATHANIEL 1616 514-079000  . Change of correspondence address or indication of "Fee Address" (37)	APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$300 \$0 \$1000 \$11/24/2006  EXAMINER ART UNIT CLASS-SUBCLASS  PRYOR, ALTON NATHANIEL 1616 514-079000  Change of correspondence address or indication of "Fee Address" (37 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address' Indication for "Fee Address" Indication form PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address' Indication for "Fee Address" Indication form PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address' Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Vision on the patent front page, list (1) the names of up to 2 registered patent attorneys or agents. If no name is 2 registered patent attorneys or agents. If no name is 3 a registered patent attorneys or agents. If no name is 3 a registered patent attorneys or agents. If no name is 3 a registered patent attorneys or agents. If no name is 3 a registered patent attorneys or agents. If no name is 3 a registered patent attorneys or agents. If no name is 3 a registered patent attorneys or agents. If no name is 3 a registered patent attorneys or agents. If no name is 3 a registered patent attorneys or agents. If no name is 3 a registered patent attorneys or agents. If no name is 3 a registered patent attorneys or agents. If no name is 5 a registered patent attorneys or agents. If no name is 5 a registered patent attorneys or agents. If no name is 6 a registered patent attorneys or agents. If no name is 6 a registered patent attorneys or agents. If no name is 6 a registered patent attorneys or agents. If no name is 6 a registered patent attorneys or agents. If no name is 6 a registered patent attorneys or agents. If no name is 6 a registered patent attorneys or agents. If no name is 6 a re	10/687,102	10/15/2003	<del></del>	Edward H. Abraham		DC-0242	7243
EXAMINER	•	: METHOD OF TREAT	ING BONE METASTAS	SIS			
EXAMINER							
EXAMINER							
EXAMINER  ART UNIT  CLASS-SUBCLASS  PRYOR, ALTON NATHANIEL  1616  514-079000  Change of correspondence address or indication of "Fee Address" (37  CR 1,563).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The Address form PTO/SB/122 attached.  The Address form PTO/SB/122 attached.  The Address indication (or "Fee Address" Indication form PTO/SB/123, Rev 03.02 or more recent) attached. Use of a Customer Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government  At The following fee(s) are submitted:    Substitute for filing and state form of Fee(s): (Please first reapply any previously paid issue fee shown above)    A check is enclosed.   Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)    A check is enclosed.   Payment by credit card. Form PTO-2038 is attached.   Payment by	APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	FEE TOTAL FEE(S) DUE	DATE DUE
PRYOR, ALTON NATHANIEL 1616 514-079000    Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).   Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. Or Change of Correspondence Address from PTO/SB/122 attached. Or "Fee Address" indication for "Fee Address "indication for "Fee Address" indication for "or end of a customer Number is required. The part of the patient attorney of agents OR, alternatively, (2) the names of up to 3 registered patient attorneys or agents. If no name is 1 considered attorney or agent) and the names of up to 2 registered patient attorneys or agents. If no name is 2 considered attorney or agent and the names of up to 3 registered attorney or agent) and the names of up to 3 registered patient attorneys or agents. If no name is 3 considered attorney or agent and the names of up to 3 registered patient attorneys or agents. If no name is 3 considered attorney or agent and the names of up to 3 registered patient attorneys or agents. If no name is 3 considered attorney or agent and the names of up to 3 registered attorney or agent) and the names of up to 3 registered attorney or agent) and the names of up to 3 registered attorney or agent and the names of up to 3 registered attorney or agent by agent and the names of up to 3 registered attorney or agent by agent and the names of up to 3 registered attorney or agent in the sum and the patient. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Pages check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity data. The following fee(s) are submitted:  (a) The following fee(s) are submitted:  (b) Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  (c) A check is enclose	nonprovisional	YES	\$700	\$300	\$0	\$1000	11/24/2006
Change of correspondence address or indication of "Fee Address" (37   CFR 1.563).   Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.   Change of correspondence address (or Change of Correspondence Address orm PTO/SB/122) attached.   "Fee Address" indication (or "Fee Address" Indication form PTO/SB/37; Rev 03-02 or more recent) attached. Use of a Customer Number is required.   S. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.   Change in Entity Status (from status indicated above)   A check is enclosed.   Payment by credit card. Form PTO-2038 is attached.   Payment by cre	EXAM	INER	ART UNIT	CLASS-SUBCLASS			
Change of correspondence address (or Change of Correspondence   Change of	PRYOR, ALTO	N NATHANIEL	1616	514-079000			
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.   Climate and the correspondence address for a gent SS (R, alternatively, and a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent autoriesy or agent so and single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent autoriesy or agent so and single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent autoriesy or agent so and single firm (having as a member a registered patent autoriesy or agent) and the names of up to 2 registered patent autoriesy or agent) and the names of up to 2 registered patent autoriesy or agent) and the names of up to 2 registered patent autoriesy or agent) and the names of up to 2 registered patent autoriesy or agent) and the names of up to 2 registered patent autoriesy or agent) and the names of up to 2 registered patent autoriesy or agent) and the names of up to 2 registered patent autoriesy or agent) and the names of up to 2 registered patent autoriesy or agent) and the names of up to 2 registered patent autoriesy or agents. If no name is 1 single firm (having as a member a registered patent autoriesy or agents. If no name is 1 single firm (having as a member a registered patent autoriesy or agents. If no name is 1 single firm (having as a member a registered patent autoriesy or agents. If no name is 1 single firm (having as a member a registered patent autoriesy or agents. If no name is 1 single firm (having as and member a registered patent autoriesy or agents. If no name is 1 single firm (having as a		ence address or indicatio	n of "Fee Address" (37	2. For printing on the pa	atent front page, lis	it	
Address form PTO/SB/12) attached.    "Fee Address" indication (or "Fee Address" Indication form PTO/SB/147; Rev 03-02 or more recent) attached. Use of a Customer Number is required.    "See Address" indication (or "Fee Address" Indication form PTO/SB/147; Rev 03-02 or more recent) attached. Use of a Customer Number is required.    "See Address" indication (or "Fee Address" Indication form PTO/SB/147; Rev 03-02 or more recent) attached. Use of a Customer Number is required.    "See Address" indication (or "Fee Address" Indication form is not a customer of a single firm (having as a member a registered attorneys or agents. If no name is 3	CFR 1.363).	andanaa addrass (ar Cha	nge of Correspondence			t attorneys 1	
"Fee Address" indication (or "Fee Address" Indication form PTO/SBAY; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):   Individual   Corporation or other private group entity   Government at a. The following fee(s) are submitted:   4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)   A check is enclosed.   Payment by credit card. Form PTO-2038 is attached.   Payment by credit card. Form PTO-2038 is attached.   Payment by credit card. Form PTO-2038 is attached.   The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number   (enclose an extra copy of this form).  5. Change in Entity Status (from status indicated above)   A Applicant claims SMALL ENTITY status. See 37 CFR 1.27.   b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature   Date   Registration No.	Address form PTO/SE	3/122) attached.	inge of Correspondence	(2) the name of a single	e firm (having as a	member a 2	
Number is required. Isted, no name will be printed.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government data. The following fee(s) are submitted:    A b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Payment by credit card. Form PTO-2038 is attached.    A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is entry authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).  5. Change in Entity Status (from status indicated above)    A applicant claims SMALL ENTITY status. See 37 CFR 1.27.	"Fee Address" ind	ication (or "Fee Address	" Indication form	registered attorney or a	gent) and the nam	es of up to	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):   Individual   Corporation or other private group entity   Government da. The following fee(s) are submitted:   4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)   A check is enclosed.   Payment by credit card. Form PTO-2038 is attached.   Payment by credit card. Form PTO-2038 is attached.   The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).  6. Change in Entity Status (from status indicated above)   A Applicant claims SMALL ENTITY status. See 37 CFR 1.27.   b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in nterest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature   Date   Da	Number is required.	of more recent, attact	icd. Use of a Customer	listed, no name will be	printed.	3	
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):					•		
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):	PLEASE NOTE: Unl	ess an assignee is ident	ified below, no assignee	data will appear on the pa	itent. If an assign	ee is identified below, the	document has been filed for
Please check the appropriate assignee category or categories (will not be printed on the patent):			piction of this form is 110				
As. The following fee(s) are submitted:    Issue Fee	(-,					,	
As. The following fee(s) are submitted:    Issue Fee							
☐ Issue Fee ☐ A check is enclosed. ☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).  5. Change in Entity Status (from status indicated above) ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in nterest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature Date	Please check the appropri	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual Co	rporation or other private gr	oup entity Government
☐ Issue Fee ☐ A check is enclosed. ☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).  5. Change in Entity Status (from status indicated above) ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in nterest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature Date	1a The following fee(s):	are submitted:	41	h Payment of Fee(s): (Plea	se first reannly ar	v previously paid issue fee	shown above)
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number  Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  Description of the United States Patent and Trademark Office.  Authorized Signature  Date  Typed or printed name  Registration No.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number  Charge in Entity Status (from status indicated above)  Date  Registration No.  Registration No.		are submitted.			oo moe teappiy at	., providusty para issue for	
overpayment, to Deposit Account Number		lo small entity discount	permitted)		d. Form PTO-2038	is attached.	
S. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in nterest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature  Date  Typed or printed name  Registration No.	Advance Order - #	# of Copies		The Director is hereby	authorized to char	ge the required fee(s), any d	eficiency, or credit any
□ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in nterest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature □ Date □  Typed or printed name □ Registration No. □	Change in Entity Sta	tus (from status indicate	d ahove)	- Overpayment, to Depo-	- recount runner	(enclose	an extu copy of this form).
Authorized Signature Date  Typed or printed name Registration No				☐ b. Applicant is no long	ger claiming SMAI	LL ENTITY status. See 37 C	CFR 1.27(g)(2).
Authorized Signature Date  Typed or printed name Registration No	NOTE: The Issue Fee and	d Publication Fee (if req	uired) will not be accepte	d from anyone other than the	ne applicant; a regi	stered attorney or agent; or	he assignee or other party in
Typed or printed name Registration No	of the l	or the emied ste	I indicated in				
	Authorized Signature			1.3.41	Date		
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and	Typed or printed name	e			Registration N	lo	
	This collection of inform an application. Confiden	ation is required by 37 C tiality is governed by 35	CFR 1.311. The information U.S.C. 122 and 37 CFR	on is required to obtain or r 1.14. This collection is est	etain a benefit by t	he public which is to file (ar ninutes to complete, includi	nd by the USPTO to process) ng gathering, preparing, and

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



## United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspto.gov

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/687,102 10/15/2003		Edward H. Abraham	DC-0242	7243	
7590 08/23/2006			EXAM	EXAMINER	
Jane Massey Lica	ta		PRYOR, ALTO	NATHANIEL	
Licata & Tyrrell P.			ART UNIT	PAPER NUMBER	
66 E. Main Street Marlton, NJ 08053			1616 DATE MAILED: 08/23/200	6	

# Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 206 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 206 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571)-272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at 1-(888)-786-0101 or (571)-272-4200.